POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Jml		3/26/00
O.I.P.E. CLASSIFIER	MW	59	03-31-00
FORMALITY REVIEW		71622	5.22.00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔ .... Rejected
= .... Allowed
– (Through numeral)... Canceled
÷ .... Restricted

N .... Non-elected
I .... Interference
A .... Appeal
O .... Objected

Claim		Date					
Final	Original						
	1	✔	✔	✔	✔	✔	
	2	✔	✔				
	3	✔	✔				
	4	✔	✔				
	5	✔	✔				
	6	✔	✔				
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	8	✔	✔				
	9	✔	✔				
	10	✔	✔	✔	✔	✔	
	11	✔	✔				
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Claim		Date
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Claim		Date
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If more than 150 claims or 10 actions
staple additional sheet here

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Form PTO-436
(Rev. 8/99)